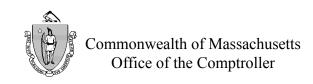
MASTER SERVICE AGREEMENT TABLE UPDATE FORM

Department/Organization Name		
Department Organization Name		



MSE	₹												
Action: Entry(E) Dept Modify(M)		MSA Number	er Obj		Title								
Text Ind	d N	ISA S	tart Da	ate	MSA End Da	ate	Chan	hange Date Ind					
MSVF	₹											_	
MSA N	umber	mber Vendor Code				Vend	or Nam	ne					
Vendor Address								Business Address					
	l		- ·	0 1	lo : 5						Б 0		D N .
LN	Region	n	Service Code Service Descrip			cription	iption			Prog Code Prog Nui		Prog Number	
Start Date End Date		d Date	Service Unit			Low Rate		High Rate					
	I												
LN	Region	n	Servic	e Code	Service Des	Service Description					Prog Co	ode	Prog Number
Start Date End Date		Se	Service Unit			Low Rate		High Rate					
Prepare	ed By: -		•		——— Title) : ———				Date:	,	—— Page	e — of —
Entered By: Title:						Date: ——							
The undersigned authorized signatory approving this document certifies that this document and a Approved By: Title							gulations. Phone #:						